

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

In the Matter of the Protective Proceedings of:)
)
)
Name of Minor: _____)
)
Date of Birth: _____)
_____)

CASE NO. _____

ANNUAL REPORT
ON GUARDIANSHIP OF A MINOR

Instructions

Please type or print clearly using black ink. The court will treat the information in this report as confidential.

After completing this report, you must sign it under oath (or affirmation) in the presence of a notary public or court clerk. See last page.

The purpose of this report is to give the court as complete a picture as possible of the minor's current situation and what has happened in the last 12 months. You must file a report every year until the guardianship ends. Your final report will be for the year during which the minor reaches age 18 (or the guardianship otherwise ends). File the final report as soon as possible after the minor turns 18.

Reporting Period

This report covers the following period: From _____ To _____

Information About Guardian

Guardian's Name _____ Daytime Phone _____

Mailing Address _____
(box or street number) (city) (state) (ZIP)

Check here if this mailing address is new. If you change your address, please notify the court.

Residence Address _____
(street address) (city) (state)

Do you live with the minor? Yes No

Relationship to minor: _____

Changes in Guardianship Needed

Should any changes be made in the guardianship? No Yes

If yes, explain: _____

If you want the court to change its order, please file form PG-190.

3. **School and Job Training.**

Does the minor attend school or any type of job training?

Yes. Name of school: _____

City: _____ Grade: _____

Describe the minor's school experience (grades, relationships, behavior): _____

No, because: _____

4. **Work.**

Is the minor employed?

No

Yes. Describe (include type of work, name of employer, address, phone, and how long employed): _____

5. **Contacts With Minor.**

a. If the minor does not live with you, how often have you visited the minor in the past 12 months? _____

b. Have there been any other contacts? No Yes, as follows:

Type of Contact

Frequency of Contact

by telephone

by mail or e-mail

through 3rd person: _____

other: _____

c. Describe the minor's contacts with the minor's parents: _____

6. **City, State or Federal Agency Services.** Does the minor receive services from any government agency (city, state, or federal)? No Yes (describe below)

Name of Agency

Services Received

Agency Phone

7. **Significant Events.**

Describe any significant events affecting the minor that have occurred during the past 12 months: _____

8. **Minor's Income and Assets.**

a. Has a separate conservator been appointed for the minor? No Yes
Name of conservator: _____

b. Describe any income received by the minor in the past 12 months. Include earned income, investment income, government benefits, insurance proceeds, etc. List the source and the amount: _____

c. Did the minor receive an Alaska Permanent Fund Dividend? Yes No
If yes, how was the money spent or invested? _____

d. Do you receive child support from the minor's parents?

Yes, \$ _____ per month. No

e. Does the minor have health insurance (from Denali KidCare or another policy)?

Yes (describe): _____ No

f. Is there a bank savings account for the minor? Yes No

If yes, what bank: _____ Balance \$ _____

g. Other savings, investment, or checking accounts for the minor.

<u>Name of Financial Institution</u>	<u>Balance in Minor's Account</u>
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_____	_____
_____	_____
_____	_____

h. Trusts. Is the minor a beneficiary of any trusts (meaning the minor has the right to receive benefits of some kind from the trust)? No Yes

Name of Trust: _____

Name and Address of Trustee: _____

i. Other Assets. List other valuable assets that belong to the minor (for example: motor vehicles, Native Corporation stock, fishing permits, etc.): _____

j. Are there any pending lawsuits involving the minor? Yes No

If yes, describe: _____

Oath

I do solemnly swear (or affirm) that the information given in this report is true and correct to the best of my knowledge and belief.

Date

Guardian's Signature

Subscribed and sworn to or affirmed before me at _____, Alaska
on _____, 20____.

(SEAL)

Clerk of Court, Notary Public or other person
authorized to administer oaths.

My commission expires: _____